TO WITEDNAL TRANSF	ER REQUEST FOR S.N. 09	183129
16-21 31	TRIM	(print name)
DATE:	REASON(S):	
	A. You had Parent	(check box)
ORWARD TO:	B. See Title	(check box)
A. Art Unit: $\frac{2664}{370}$	C. See Abstract	(check box)
•	D. See Claim(s):	
Subclass:		
FURTHER EXPLANATION IF I	NEEDED: LEX COMMUNICATION / 1.	NIERNET
DATE:	FROM:	(print name)
	REASON(S):	
FORWARD TO:	A. You had Parent	(check box)
FORWARD 10. A. Art Unit:	B. See Title	(check box)
· · · · · · · · · · · · · · · · · · ·	C. See Abstract	(check box)
B. Class:	D. See Claim(s):	·
C Subclass:		
	FROM:	(print name)
DATE:		
	REASON(S): A. You had Parent	(check box)
FORWARD TO CLASSIFIER	B. See Title	(check box)
	C. See Abstract	(check box)
	D. See Claim(s):	
FURTHER EXPLANATION IF	FNEEDED:	
	<u>.</u>	
	CLASSIFICATION	
DISPOSITION BY 2700	• • • • • • • • • • • • • • • • • • •	
DATE:	LOCACCICIGIA	
	CLASSIFIER:	
	REASON(S):	
FORWARD TO:	REASON(S): A. You had Parent	(check box)
FORWARD TO: A. Art Unit:	REASON(S): A. You had Parent B. See Title	(check box)
	REASON(S): A. You had Parent	

FURTHER EXPLANATION IF NEEDED:

C Subclass: